



# Pinole Youth Center

## LEADER IN TRAINING APPLICATION

### Entering 9th-12th grades (Ages 14-17)

Thank you for your interest in the Leader In Training (LIT) opportunity with the Pinole Youth Center and City of Pinole Recreation Department. We are excited you're interested in joining us!

The general duties of the LITs will be to help coordinate games and activities, assist with field trips, play sports and games, provide homework and project help, give guidance through activities, and to act as a role model with youth participants. LITs acquire community service hours necessary to graduate high school and gain valuable work experience, all the while having fun!

**All LITs must be able to commit to at least 2 days per week in the After School Program. A minimum of 3 days per week is required, for a minimum of 7 out of 10 weeks in the Summer Camp Program. Half days due to Summer School are acceptable with notice. Applicants are required to submit a completed LIT Volunteer Application to the Recreation Coordinator via email at [Youth@ci.pinole.ca.us](mailto:Youth@ci.pinole.ca.us). If selected, applicants will be required to complete a TB Test and live scan service. If you have any questions about the LIT program, please send an email or call 510-724-9004. Pinole Youth Center is located at 635 Tennent Ave. Pinole**

#### **AFTER SCHOOL PROGRAM:**

There is no deadline for LIT's applying for After School Program, and Coordinator will schedule interview and all other needed meetings.

#### **SUMMER CAMP:**

Please see below for Summer Camp volunteer mandatory deadlines and training  
Camp dates and times are: June \_\_\_ to Aug \_\_, from 8:30am- 6pm, Monday- Friday.

**IN ORDER TO BE CONSIDERED AS A LEADER IN TRAINING PINOLE SUMMER CAMP 2024, YOU MUST ATTEND THE FOLLOWING 3 EVENTS.** (All located at Pinole Youth Center, 635 Tennent Ave)

- **1st Friday of May by 6:00pm (deadline for applications)**

**Return the LIT Application by 6pm.** We understand that many applicants will not have work experience, but it is necessary that the application is completed. Extracurricular and leadership activities should be listed, including (but not limited to!) involvement in organized sports, clubs, youth groups, church membership, volunteer programs, babysitting, etc.

- **2nd Wednesday of May 4:00-6:00pm**

Attend the **Mandatory Group Interview**. Candidates will be notified via telephone if they have been selected for an LIT position.

- **3rd Thursday of May 6-8pm**

Attend **Mandatory LIT Training**. During this time, we will be discussing the Summer Camp schedule, the role of the LITs, leadership & facilitation skills, procedures & expectations, and conflict resolution. We will provide 2 t-shirts per LIT and additional t-shirts maybe purchased for \$10.



# City of Pinole Volunteer Application Form

2131 Pear Street  
Pinole, CA 94564  
[www.ci.pinole.ca.us](http://www.ci.pinole.ca.us)

**This form must be completed by anyone who wishes to volunteer for the City of Pinole.**

Volunteer Position: \_\_\_\_\_ Date: \_\_\_\_\_

## PERSONAL INFORMATION

Full Name \_\_\_\_\_  
Last First Middle Initial

Address \_\_\_\_\_  
Street City State Zip

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Other Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Valid CA Driver License? Yes \_\_\_ No \_\_\_ License Number \_\_\_\_\_ Expiration \_\_\_\_\_

## EDUCATION

School Currently Attending and Grade: \_\_\_\_\_  
Circle One: Senior / Junior / Sophomore / Freshman / Homeschool (between the ages of 14-17) / Middle School

High School attended: \_\_\_\_\_

College: \_\_\_\_\_ Major: \_\_\_\_\_

Licenses or Certifications, which are related to the position for which you are applying:

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## REFERENCES

Please list three persons acquainted with your capabilities – **NOT RELATIVES**

Name Address Daytime Phone Evening Phone

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## INTERESTS

Please check all that apply:

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Administrative Tasks | <input type="checkbox"/> Computer Input / Data Entry | <input type="checkbox"/> Filing             |
| <input type="checkbox"/> Phone Support        | <input type="checkbox"/> Typing                      | <input type="checkbox"/> Word Processing    |
| <input type="checkbox"/> Website Support      | <input type="checkbox"/> Video Operations            | <input type="checkbox"/> Recreation Support |
| <input type="checkbox"/> Senior Center        | <input type="checkbox"/> Other                       | <input type="checkbox"/>                    |

Volunteer Experience: \_\_\_\_\_

\_\_\_\_\_

## TIME PERFORMANCE

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> One time project    | <input type="checkbox"/> Regular Hours      | <input type="checkbox"/> Five hours per month |
| <input type="checkbox"/> Ten hours per month | <input type="checkbox"/> 20 hours per month | <input type="checkbox"/> Other                |

## WORK EXPERIENCE

Employer \_\_\_\_\_ Address \_\_\_\_\_

Dates Employed: From: \_\_\_\_\_ To: \_\_\_\_\_ Total Time Years \_\_\_ Months \_\_\_ Hours per week \_\_\_\_\_

Title \_\_\_\_\_ Telephone \_\_\_\_\_ May we contact? \_\_\_\_\_

Duties \_\_\_\_\_

\_\_\_\_\_

Employer \_\_\_\_\_ Address \_\_\_\_\_

Dates Employed: From: \_\_\_\_\_ To: \_\_\_\_\_ Total Time Years \_\_\_ Months \_\_\_ Hours per week \_\_\_\_\_

Title \_\_\_\_\_ Telephone \_\_\_\_\_ May we contact? \_\_\_\_\_

Duties \_\_\_\_\_

\_\_\_\_\_

Have you ever been convicted of any offense(s) other than a driving violation? Yes \_\_\_ No \_\_\_

If yes, list offense(s) and date(s) of convictions on another sheet of paper and attached to application. A yes answer does not necessarily disqualify.

Were you ever terminated or forced to resign a position? Yes \_\_\_ No \_\_\_ If yes, list details on a separate sheet of paper and

attached to application. This answer will not necessarily result in disqualification.

## Official Use Only:

Contingencies prior to placement: \_\_\_ Background Check \_\_\_ Drug Screen \_\_\_ Livescan

# CITY OF PINOLE

## VOLUNTEER WAIVER AGREEMENT

*Please read the following statements carefully and indicate your understanding and acceptance by signing your name in the space indicated.*

- I certify all information contained on this application is true and complete to the best of my knowledge and belief, and has been given voluntarily.
- I understand this information may be disclosed to any party with legal and proper interest, and I release the City of Pinole from any liability whatsoever for supplying such information.
- I understand a criminal record check may be conducted.
- I hereby authorize references listed on this application to answer any questions and to furnish any accurate information from their records concerning me, and I hereby release such companies and persons from any liability for such action.
- As a volunteer, I agree to perform to the best of my ability the tasks as outlined in my job description or the tasks established by my supervisor; to accept supervision, maintain confidentiality; observe stated goals and objectives and give my supervisor adequate notice before termination as a volunteer.
- I will not distribute literature of any type.
- As a volunteer, I understand I will not be paid for my services, and the City of Pinole will not provide me with employee benefits, accident insurance, death benefits, nor does the City of Pinole carry commercial general liability insurance covering volunteers.
- I fully understand and agree that either for failure to fully comply with all of the obligations outlined in the Volunteer Application, or for any reason whatsoever, while performing my voluntary services to the City of Pinole in voluntary capacity, the City of Pinole at its sole discretion, may immediately terminate my volunteer services.
- In consideration of the City accepting my participation as a volunteer, I agree on behalf of myself, my heirs, executors, administrators and assigns, to hold the City, its officers, agents, representatives, and employees harmless from injuries or damages that may occur to my person and/or property while participating as a City volunteer, even if the injury or damage results from the negligence of the City and/or its officers, agents, representatives or employees. Further, I waive, release, discharge and agree not to sue the City and/or its officers, agents, representatives and employees for any personal injury, including death, and/or property damage that I may incur as a volunteer. I understand that if I act outside my scope or authority as a City volunteer, I could be subject to a lawsuit against me for which the City will not defend and understand that I could be subject to various penalties, including imprisonment, if subject to a lawsuit.

**I have carefully read this release and fully understand its contents. I understand that this is a release of all liability. I am aware that by signing this release I am giving up important legal rights. I have signed this release freely and voluntarily. I have been advised that, under Worker's Compensation laws, Worker's Compensation benefits will be the sole and exclusive remedy if I am injured while performing my assigned duties as a volunteer for the City.**

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Applicant's Signature/Date

If applicant is under the age of 18, a parent or legal guardian must sign this form.

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Parent or Legal Guardian Signature/Date

## **Supplemental Questionnaire**

Please return this paper with your application. Print or type clearly.

1.) Briefly state why you are interested in becoming Leader In Training.  
Be Specific.

2.) What skills or abilities could you contribute to the Youth Center?

3.) What experience do you have working with youth, either your peers or younger?

4.) What values do you feel are most important when working with youth?

## Summer Camp and/or After School Program: LIT Information

Name:

LIT Cell Phone Number:

LIT Email:

What vacation dates would you like to request?

**AFTER SCHOOL PROGRAM: (Sept to May)**

**SUMMER: June to Aug** (*Maximum time off is 2 weeks. Please make requests based on session of camp to be missed.* (Must be submitted to Youth Services Coordinator 2 weeks prior to start of summer.))

What weekdays are you available to work weekly in the After School Program (3pm-6pm)

(circle each)

Monday

Tuesday

Wednesday

Thursday

Friday

What times do you prefer participating at summer camp? (circle one)

9-12pm

1-4 pm

9-4 pm Days

Preferences will be taken into consideration; however, we cannot guarantee any requests.

What size T-Shirt (adult sizes) do you wear? (circle one)

S

M

L

XL

OTHER \_\_\_\_\_